

ACADEMIE INTERNATIONALE DE PATHOLOGIE
DIVISION FRANÇAISE

Cancers gastriques (sporadic and familial)
et états précancéreux

Cas 9



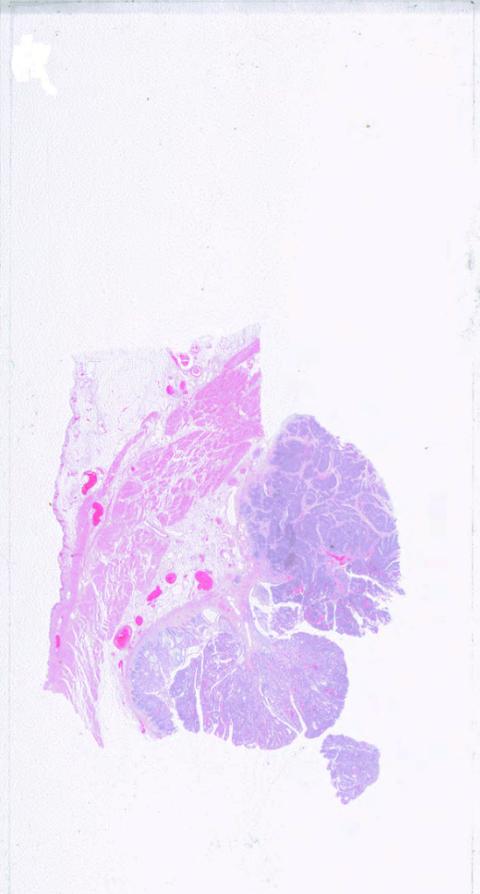
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Case 9 – H06/12849 – Male, 70 y, gastric neoplasm

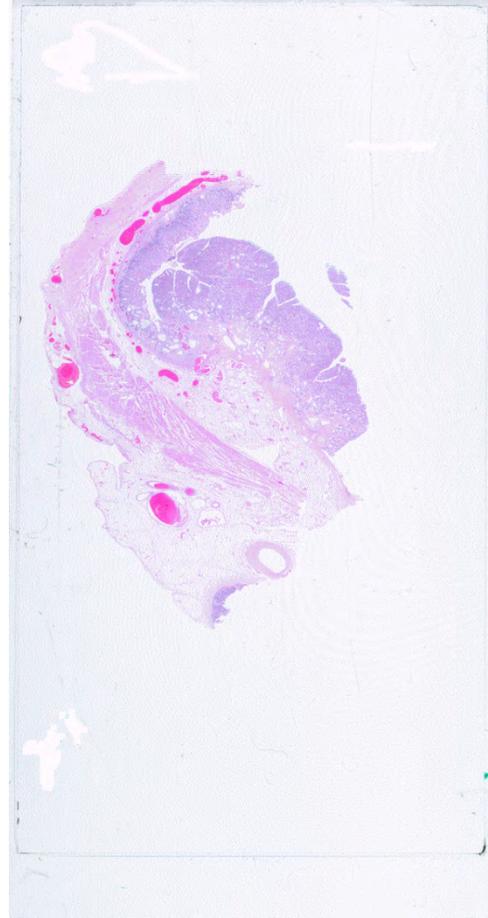
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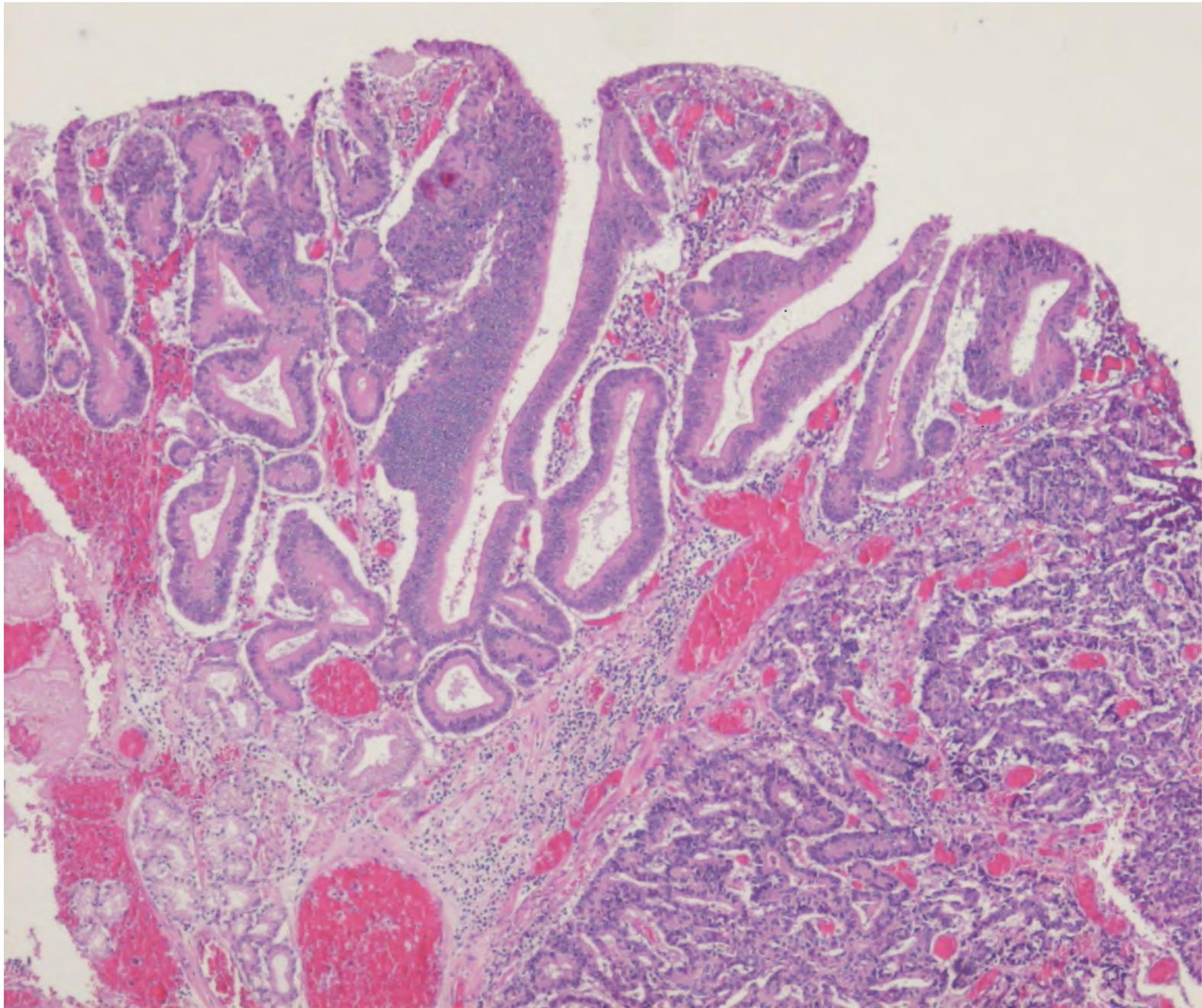
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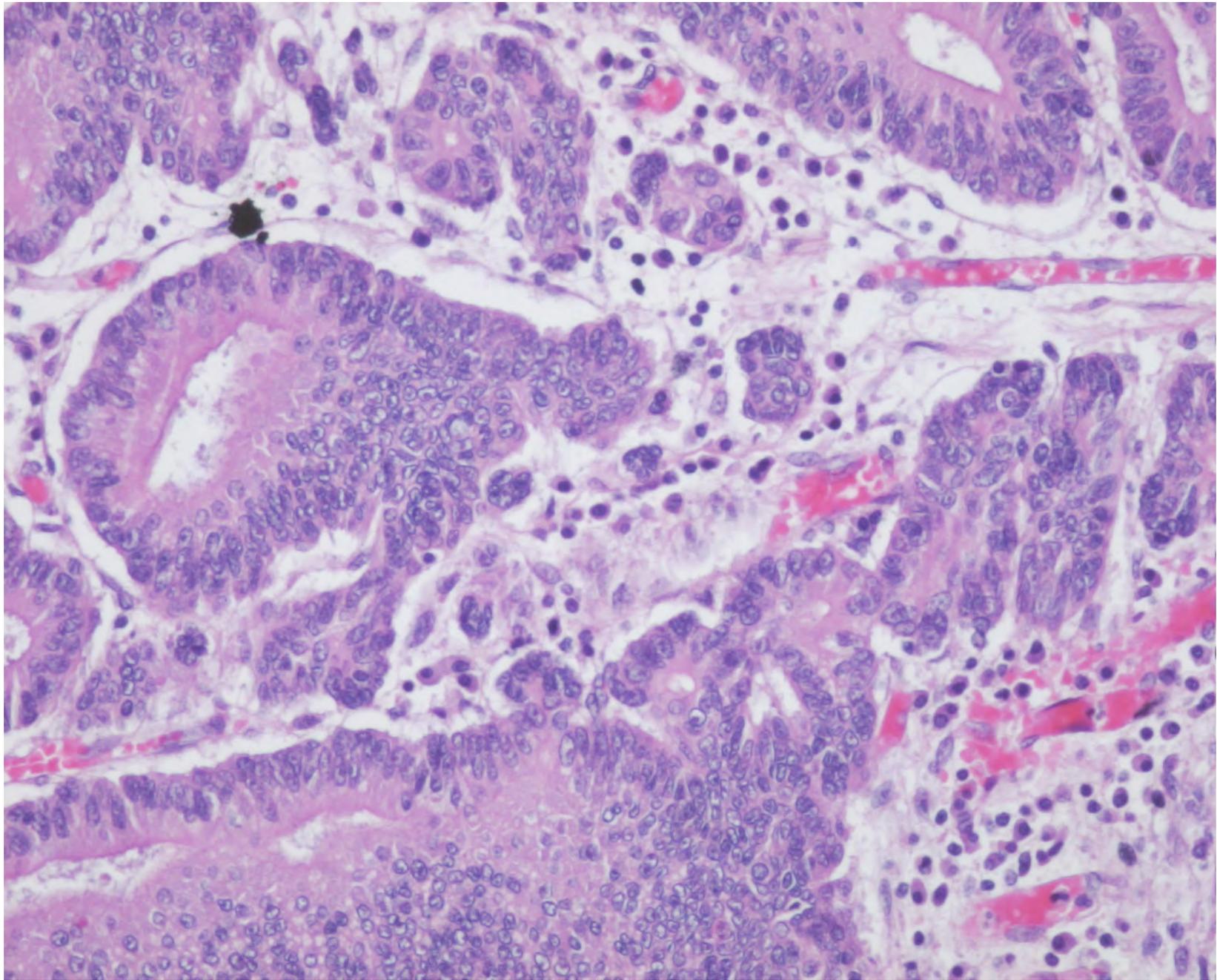


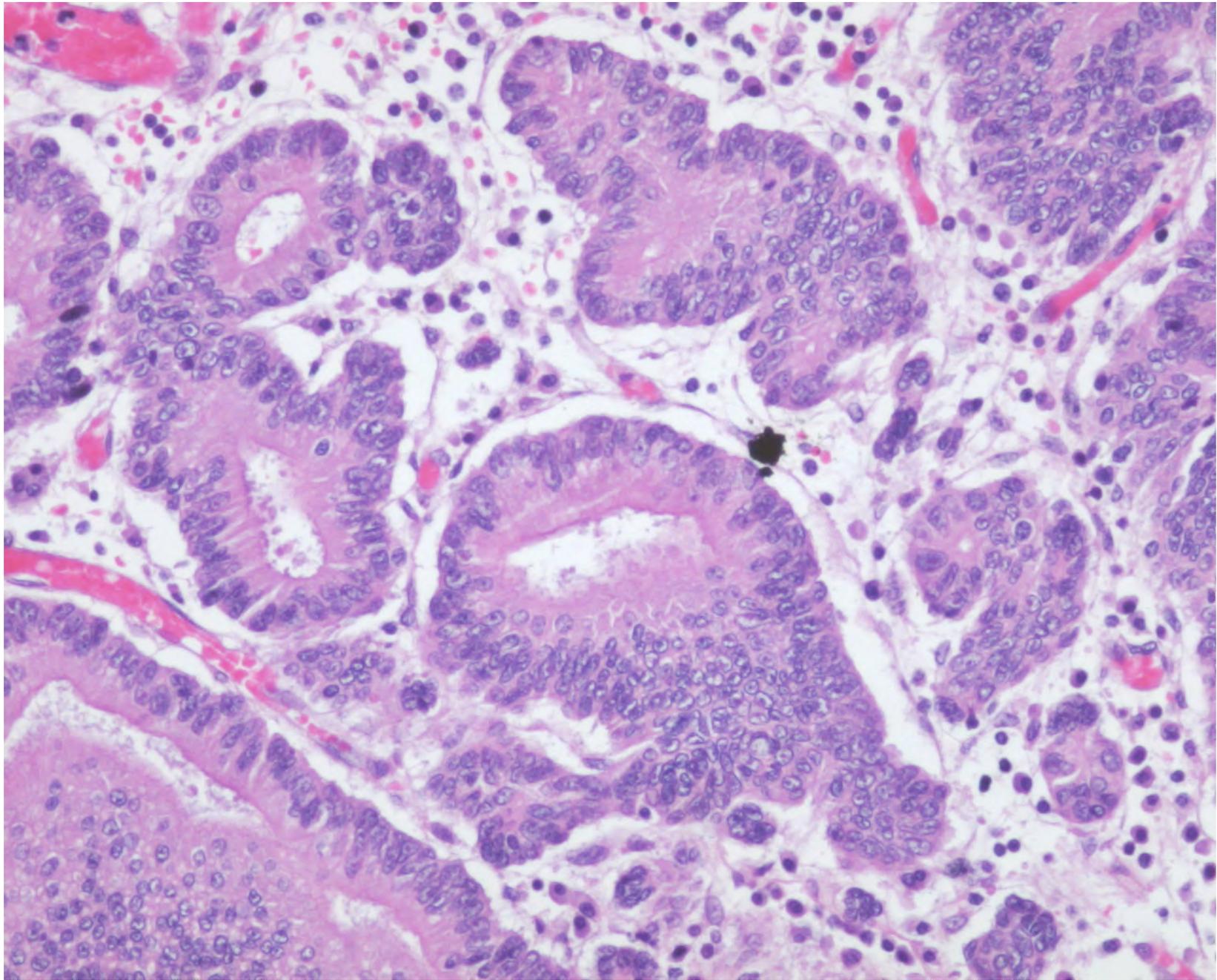
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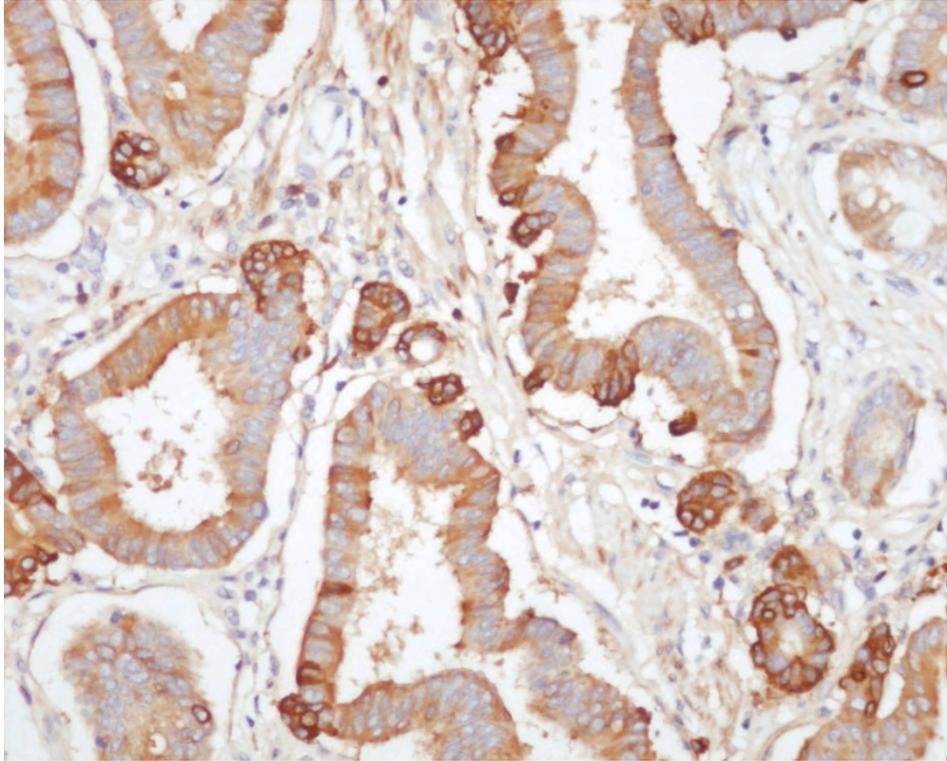
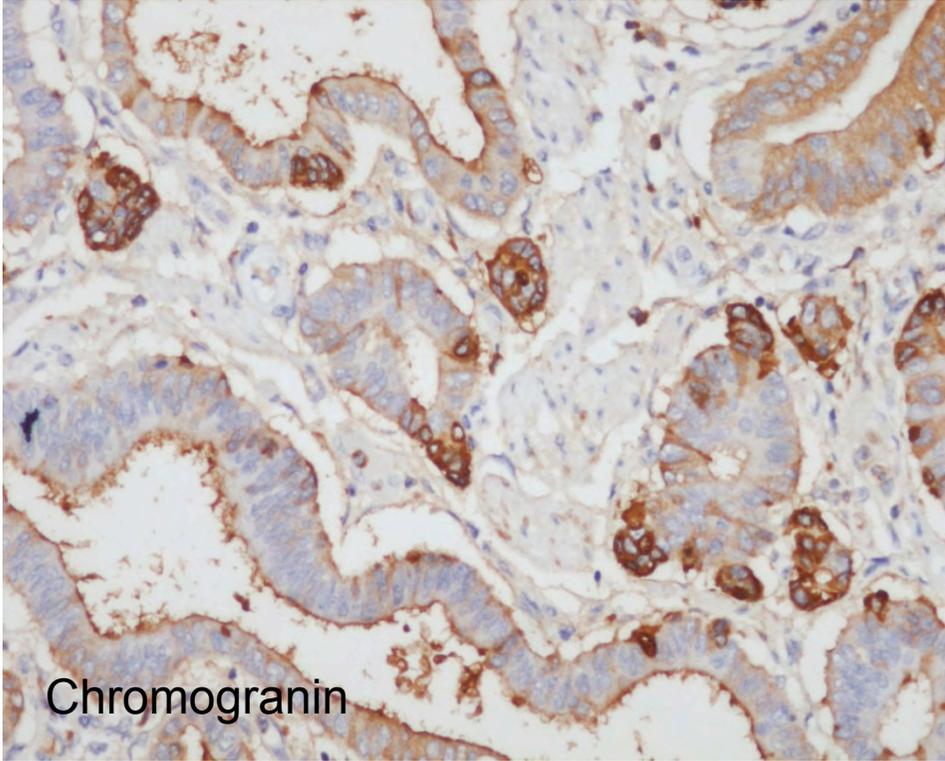
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Mixed exocrine(glandular)-endocrine carcinoma,
pT2N0M1

In the literature a long list of terms are used to describe the tumours with mixed exocrine- endocrine features:

- Mixed exo-endocrine tumour or carcinoma
- Composite glandular-endocrine tumour or carcinoma
- Combined exocrine-NE tumour or carcinoma
- Collision tumour (adenocarcinoma+carcinoid/small cell carcinoma)
- NE differentiated adenocarcinoma
- Adenocarcinoma with (focal) NE differentiation
- (adeno)Carcinoma with divergent differentiation
- Multidirectionally differentiated carcinoma
- Endocrine mucin-producing carcinoma
- Amphicrine tumour
- Adenocarcinoid
- Goblet cell carcinoid
- Mucinous carcinoid

From a practical point of view, MEECs differ from carcinomas with focal NE differentiation by

- 1)the extension of each component (more than 30%)
- 2)the structural pattern of the NE component.

The recognition of MEECs may be of relevance for a targeted therapeutic strategy, foreseeing the use of biotherapies similar to those proposed for pure NE tumours

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